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Official Records

8th plenary meeting
Friday, 2 July 1999, 3 p.m.
New York

President: Mr. Opertti ..... (Malaysia)

In the absence of the President, Mrs. Osode (Liberia), Vice-President, took the Chair.

The meeting was called to order at 3.10 p.m.

Agenda item 8 (*continued*)

Overall review and appraisal of the implementation of the Programme of Action of the International Conference on Population and Development

The Acting President: I now give the floor to His Excellency Mr. Cha Heung-bong, Minister of Health and Welfare of the Republic of Korea.

Mr. Cha (Republic of Korea): In 1994, the international community committed itself to a comprehensive plan of action integrating population concerns into all economic and social activities. This special session of the General Assembly is an opportunity to evaluate how effective we have been in implementing the goals and commitments established in Cairo. Our task at this special session is to set a steady and sure course for the international community for the new millennium on this vital global agenda.

In the years since Cairo, real progress has been made at the global level, in particular for the reduction of maternal and infant mortality and fertility rates, the expansion of reproductive health-care systems and the empowerment of women. However, a frank evaluation of our progress will recognize that we are still faced with daunting challenges in several key areas.

First, political will for the advancement of the Cairo commitments in many developing countries has been weakened by the recent financial crisis and continued economic stagnation, as well as by frequently recurring natural disasters. Secondly, while many countries still suffer from problems caused by rapid population growth, others are struggling with a changing population structure. Thirdly, reproductive health and rights remain critical areas of concern. In addition, unsafe abortion is becoming an increasingly serious issue. Fourthly, the financial resources necessary to implement the commitments made in Cairo have yet to be fully mobilized at both the national and international levels.

Notwithstanding all these challenges, we should not understate the crucial importance of having achieved an international consensus on the principle of people-centred population policies and programmes. Now, we should map out new strategies to translate these principles into concrete actions.

In the Republic of Korea, we redirected our population policy in 1996 from an emphasis on quantity to one on quality and the welfare of the population. Even though the Republic of Korea has successfully completed the process of demographic transition by keeping the total fertility rate at 1.7 per cent since 1987, new challenges have emerged, such as the high prevalence of unsafe abortions, increasing sexual problems among adolescents, the imbalance of the sex ratio at birth and the disintegration of families.

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The adoption of a new national population policy, thus, was very timely and appropriate in addressing the new population challenges that Korean society is currently facing.

Under the new population policy, the Government of the Republic of Korea has given priority to major reproductive health issues in designing, implementing and evaluating national health promotion programmes. Considering the broader dimensions of reproductive health care, we believe that it is crucial to establish health systems at the national level that can provide a package of reproductive health services. In the light of this, the Government of the Republic of Korea is carrying out a maternal- and child-health demonstration project in 23 public health centres.

The growing youth population needs adequate reproductive health care. The Korean Government has carried out sex education and counselling programmes in schools to protect adolescents from unwanted pregnancy and sexual violence, as well as to teach them responsible sexual behaviour. The Government of the Republic of Korea will make further efforts to raise public awareness and to extend the scope of the programmes related to reproductive health care for adolescents.

Women are recognized as a fundamental force in the quest to eradicate poverty and maintain the stability of families and societies. Enhancing gender equality and the empowerment of women, as we reaffirmed at the International Conference on Population and Development (ICPD), are cornerstones of people-centred population policies. Education, especially for the girl child, is critical in empowering women.

The Government of the Republic of Korea has put in place a series of laws which are aimed at protecting women from sexual and domestic violence, promoting women's capacity to actively participate in society, and increasing equal employment opportunities. In particular, the Government of the Republic of Korea established the Presidential Commission on Women's Affairs in 1998 in order to plan and implement policies and programmes for women in an effective and integrated manner.

Carrying out a population and development agenda should not be confined to individual nations, but rather should be a global issue. Thus, the establishment of a full partnership among countries, international organizations and civil society is one of the most important elements in achieving ICPD goals.

The Republic of Korea is always mindful of the valuable support provided by the international community during the early phase of its development process. Now, we hope to share the lessons, experiences and know-how that we have learned through our own development process with other developing countries, especially via South-South cooperation.

In this context, the Government of the Republic of Korea has carried out population-related cooperation programmes through the Korea International Cooperation Agency (KOICA). Technical and human resource cooperation are major areas of KOICA's activities with individual countries. In addition, KOICA is developing health-related programmes in collaboration with research institutions and non-governmental organizations, as well as with the other government sectors.

The goals and commitments we set in Cairo are ambitious but, we believe, attainable. We should now send out a renewed and clear signal of a new path towards real human development for the twenty-first century.

The Acting President: I now give the floor to His Excellency Mr. Abdul Kader Cisse, Minister of Economy and Development of Burkina Faso.

Mr. Cisse (Burkina Faso) (*spoke in French*): At the outset, I wish to extend my warm congratulations to Mr. Opertti for his outstanding election to the presidency of the General Assembly at this special session devoted to the review and appraisal of the implementation of the Programme of Action of the International Conference on Population and Development (ICPD). I am convinced that, under his leadership, we will reach important and unanimous conclusions and recommendations for the ever more successful implementation of the Cairo Programme of Action. Moreover, we have no choice but to address together, with clear thinking and pragmatism, the population and development issues that will affect the future of all humanity.

When the Programme of Action of the International Conference on Population and Development (ICPD) was adopted in Cairo in September 1994, with its central focus on meeting the basic needs of mankind, my country, Burkina Faso, was delighted at the new prospects it opened up to us for solving our population and development problems. In fact, given the low level of human development in Burkina Faso, our Government drew heavily on the Cairo Programme of Action and the

outcomes of other major international conferences in formulating its development policy and strategy.

Thus, in October 1995, the Government adopted a letter of intent for its policy of sustainable human development, whose goal is to centre its strategy for the country's development on the concept of human security.

By "human security", we mean economic security linked to access to remunerative employment, to activities that generate stable income for women, and to basic education and professional training, with particular emphasis on the education of the girl child and literacy training for women.

We mean health security, which is understood to include low-cost access to primary health care, especially to reproductive health services, including family planning. It is in this context that we must place the adoption by the Burkina Faso Government of a strategic orientation plan for reproductive health and an integrated strategy for safe maternity, as well as the convening, from 15 to 18 June last, of a meeting of the principal health sectors, uniting all components — the State, the private sector, civil society, non-governmental organizations and the grass-roots community — with a view to formulating a national plan for health development for the years 2001 to 2010.

Human security means food security, which is linked to access to well-balanced nutrition, including drinking water, especially in rural areas where services remain inadequate.

We would cite environmental security, linked to the preservation of a healthy environment through the development of measures to restore the environment and, more specifically, integrated programmes to reduce poverty aimed at limiting the impact of humankind on the environment.

Finally, human security means individual and political security through the establishment of good governance, with emphasis on the primacy of law and the implementation of new organizational and administrative principles that ensure broader participation by the population, particularly women, in the development process. It was in the proper understanding of the important role of women in the development process and of their right to physical integrity that the Burkina Faso Government established a national committee to combat all forms of discrimination against women and adopted a law prohibiting and punishing female genital mutilation. In order to complete the institutional aspect of strengthening the role of women in the development process, a Ministry of Women's Promotion was established in June 1997. It is headed by a woman.

Above and beyond the letter of intent and the policy of sustainable human development, it should be pointed out that, since 1991, Burkina Faso has had a population policy that has been reassessed to take into account the conclusions of major international conferences, in particular those of the Cairo Conference. For my Government, this policy document constitutes a frame of reference and of coordination for our actions in the field of population.

In spite of the important efforts made and of our firm political will, the challenges facing my country remain large and extremely urgent. Thus, my delegation wishes to take the timely and wonderful opportunity of this special session to stress certain elements related to the implementation of the ICPD Programme of Action.

Above and beyond limits in competent human resources, the main constraint on the attainment of the goals and objectives of population programmes is undoubtedly the insufficiency of financial resources in many developing countries, especially African ones. This situation, which is deteriorating under the growing weight of servicing debts that often amount to 25 to 40 per cent of our State resources, has been very harmful to the various programmes aimed at meeting the basic needs of our populations and at reducing poverty.

In this regard, my delegation takes this excellent opportunity to welcome the various debt-alleviation initiatives of the international community, such as the Heavily Indebted Poor Countries Debt Initiative and the recent debt-alleviation decision taken by the most developed countries at their recent meeting in Cologne.

The size of debt remains great enough, in spite of these measures, to warrant our explicit emphasis on it among the constraints to the implementation of the ICPD Programme of Action and our appeal for a search for a more appropriate solution to the debt question.

The population of Burkina Faso is extremely young, with almost 50 per cent under the age of 20. Because of precocious sexual activity, this young population is exposed to many risks: unwanted pregnancy, sexually transmitted diseases, HIV/AIDS and clandestine

abortions. These cases are so numerous today that they constitute a public health problem.

That is why sexual and reproductive health care for young people is a cornerstone of national policy for reproductive health. My delegation recognizes that, in this respect, young people must have all available information in order to assume their responsibilities, but we reaffirm that this is possible only with the consistent involvement of parents.

It is obvious that, because of their modest means, our States cannot by themselves meet the basic needs of our population for food and nutrition, basic education and health care, including reproductive health care. Our States will need dynamic and transparent partnership with other actors, such as the private sector and civil society, including non-governmental organizations and grass-roots communities.

In Burkina Faso, the Government's dedication to this partnership led to its implementation of a reproductive health programme in cooperation with national and international non-governmental organizations, and to its financial contribution — howsoever symbolic — to the International Planned Parenthood Federation, thus conveying its appreciation to that organization for its useful assistance to Burkina Faso and Africa in general. In any case, this partnership is one of the primary reasons behind the success of population programmes.

Five years have elapsed since Cairo. As we said earlier, significant financial assistance has been rendered to the implementation of populations programmes. Nevertheless, our financial needs remain immense, especially in the developing countries.

Obviously, it is up to those countries to develop the relevant initiatives to mobilize more resources and to ensure their better use in social development, with emphasis on education, especially for girls, and basic health care, including reproductive health.

For its part, Burkina Faso allocates about 30 per cent of its public resources to the social sector and 17 per cent of budget resources to essential social sectors. In order to rationalize its choices and budgetary expenditures for greater effectiveness and efficiency, in 1998 the Government initiated a programme budget approach in ministerial departments, particularly in the departments of health, basic education, social action and women's advancement.

Nevertheless, given our States' paucity of resources, the donor countries and international financial institutions will have to help us implement our population programmes. In this respect, my delegation supports the idea that they must increase their contributions in accordance with the Cairo Programme of Action and, in this context, find a more adequate solution to the debt problems of the poor countries.

The Acting President: I now give the floor to His Excellency The Honourable Mr. Chapson Butale, Minister of Health of Botswana.

Mr. Butale (Botswana): The Government of Botswana attaches great importance to this special session of the General Assembly, which has brought our nations together in a common forum to review and further implement the Programme of Action of the International Conference on Population and Development (ICPD).

This session is geared not only towards providing a comprehensive global review of population issues but, more importantly, to forging effective strategies for the next millennium. In doing so, we must mobilize the political will and the necessary resources and partnerships to tackle the critical and complex issues that continue to undermine the health, development and potential of our people.

Since Cairo, Botswana has developed an explicit and comprehensive national population policy, recognizing the close interaction between population and development. To ensure effective implementation, a multisectoral plan has been put in place. The extent to which we can successfully implement this policy in a sustainable manner will largely depend on the availability of resources.

To this end, the Government has embarked on an economic diversification programme which should enable us to sustain our population and development strategies. An enabling environment has also been created for the participation of the private sector and non-governmental organizations to further strengthen their role as cooperating partners in development.

Botswana has a youthful population, with about 44 per cent of the total population under 15 years of age. This, coupled with a high population growth rate, has the potential to fuel the existing growth momentum, with consequences of varying magnitude and complexity.

Today, we have in place an effective family-planning programme which has led to a decline in the fertility rate. Further improvements are expected, as the Government is now reorienting and upgrading the maternal and child health/family-planning programme, transforming it into a more integrated reproductive health programme which explicitly includes an adolescent reproductive health component. We recognize that, with enhanced participation of males in sexual- and reproductive-health activities, these programmes could be improved. Therefore, we are targeting males in order to promote their active participation.

There has been general improvement in mortality for the whole population, especially among infants and children. This is mainly due to significant investment in the health sector by the Government. However, mortality rates will rise due to the impact of the HIV/AIDS pandemic, a situation that is likely to erode the achievements made so far.

Botswana is one of the countries most affected by the HIV/AIDS pandemic, and young women and men are the most affected. These are the most able and economically productive citizens, in whom the future of our nation is invested. As a result of the pandemic, over time an increasing number of our children will be orphaned. The impact of the pandemic is undoubtedly placing a heavy burden on individuals, families and, indeed, the entire economy. We also observe that, while women and girl children are especially vulnerable to HIV infection, there is also a disproportionate burden placed on them as caregivers.

In response to this problem, the Government has put in place a number of intervention measures within the framework of a multisectoral national policy on HIV/AIDS. These measures include the reduction of mother-to-child HIV transmission.

HIV/AIDS is a threat to mankind and requires a global response. We therefore welcome the introduction of global targets on HIV, as they will provide a yardstick for our national effort in this area. In this regard, the office of the President is providing the political leadership for an expanded and more efficacious national response.

The Government recognizes the important role that women play in the development of our nation. In this regard, a policy on women in development is being implemented to promote women's full participation in and integration into the development process. However, there are still legislative and sociocultural barriers that we need to remove in order to achieve the full empowerment of women.

Issues relating to youth have been given prominence in the development programmes of our country, and to this end a national youth policy has been devised. It focuses on adolescent reproductive health, opportunities for employment creation, family life, education, and business training in the school curriculums, as well as the provision of peer counselling by teenagers for those in and out of school.

Botswana takes pride in its achievements in the field of education. Notably, we have universal access to free education from primary to secondary school. Our challenge now is to further increase enrolment, improve quality and to reorient the system to respond to the job market.

As we enter the new millennium, unemployment and poverty remain the two most important challenges facing our country. It is against this background that the Government of Botswana is actively pursuing strategies for sustainable employment creation and poverty reduction.

The Government attaches great importance to effective partnerships with the private sector, civil society and non-governmental organizations. In recognition of these partnerships, we support these sectors, particularly in priority areas identified by our national development plans.

The Government of Botswana is fully committed to the Programme of Action and we have, within our limitations, mobilized resources for its further implementation. But, given the wide-ranging and urgent development challenges facing our nation, there is tremendous stress on domestic resources. We therefore call on our cooperating partners to provide the required technical and additional financial resources to allow for the national capacity-building necessary for moving forward with the Cairo Programme.

At this point may I take this opportunity, on behalf of the people of Botswana, to thank our development assistance partners for their continued support. The reforms instituted by the United Nations funds and programmes have made these agencies well poised to effectively carry out their mandates. In this context, we

pay tribute to United Nations Population Fund (UNFPA) for its leadership in the area of population.

We strongly appeal to the donor community to increase financial support to the United Nations system to enable it realize its development objectives. It is our hope that, for the good of our people, there will be a concerted effort by us all, in partnership, to realize the vision of this special session.

The Acting President: I now give the floor to His Excellency Mr. Simfeitcheou Pre, Minister for Planning and Development of Togo.

Mr. Pre (Togo) (*spoke in French*): It is a great honour for me to take the floor before the General Assembly at its twenty-first special session devoted to the review and appraisal of the Programme of Action of the International Conference on Population and Development (ICPD) — a session that brings together leading figures from five continents to consider, once again, new strategies for the effective implementation of the Cairo Programme of Action.

Before I continue I would like, on behalf of President Gnassingbé Eyadéma and the Government of Togo, to thank the United Nations for having closely involved my country in the various stages of this mid-term review process as well as for the perfect organization of this special session. Allow me also to pay tribute to the United Nations Population Fund and, in particular, to its Executive Director, Mrs. Nafis Sadik, for their persistent efforts to achieve a comprehensive and integrated approach in development programmes to population questions and to the prevention of poverty.

Today, the rapid population growth in our country is increasingly recognized as an obstacle to development. Thus, population issues must no longer be treated in isolation, but must be integrated into a more comprehensive approach to development. In addition, the crisis situation confronting the countries of the South — already shaken by unfavourable external events — has been reflected in a gradual deterioration in the living conditions of the population. Furthermore, we are seeing new attitudes to reproduction, sexuality, marriage and the concept of the family that are changing the socio-economic behaviour of the people, in particular of young people, women and the underprivileged, as they strive to take part in the development process.

All of these phenomena require of Governments that they set up an educational, health and family-planning system that takes account of the changes that have occurred in order to integrate them in an appropriate way into a global and sustainable approach to development.

Thus, in our view, the full integration of population issues into all aspects of development planning in order to promote social justice and to eliminate poverty with a view to sustained economic growth constitutes the best strategy for the effective implementation of the Cairo Programme of Action.

Despite the many difficulties faced by our countries, it would be no exaggeration to state that the work undertaken in the framework of the Cairo Programme of Action has yielded encouraging results.

For its part, Togo, with the support of its development partners, in particular United Nations agencies, has undertaken resolutely to combat poverty by integrating the population variable into all of its development programmes.

In this respect, I should like to give an overview of the measures taken and the results obtained by our country in implementing the Cairo Programme of Action.

Measures taken include the adoption of a national population policy; the adoption of a law prohibiting female genital mutilation; the creation of follow-up bodies for population policies and programmes, including a family-planning agency and regional ICPD follow-up committees; the revision of sectoral health policy documents to integrate all elements of reproductive health; the introduction of health modules on reproductive health in all primary and secondary education curricula, with the goal of ensuring the promotion of the concept of responsible parenthood, which is at the root of our family-planning policy; and a reduction in school fees for young girls in order to facilitate their access to education and training.

With respect to the results achieved, it is important to note — and this is very encouraging for our population policies — that the population and health survey conducted in 1998 produced the following indicators: the population growth rate showed a sharp decline, from 3.2 per cent in 1988 to 2.4 per cent in 1998; the aggregate fertility index dropped from 6.6 children per woman in 1988 to 5.4 in 1998; and the infant mortality rate

dropped from 127 per 1,000 in 1961 to 80 per 1,000 in 1988, with a further slight decline since then.

In this context, in the light of the efforts made and the work that remains to be done in the area of population, the Togolese Government would appreciate highly all kinds of support from its development partners in the implementation of its programmes aimed at improving the living conditions of the population.

My country, Togo, endorses the various measures advocated for the continued harmonious implementation of the Cairo Programme of Action and considers that they fit perfectly with its new development strategy. It also supports the view that the increased well-being of the population requires the contribution of all.

It is for that reason that I should like to make an appeal for international solidarity to mobilize the increased resources necessary to enable the United Nations agencies and in particular the United Nations Population Fund better to support our countries in their efforts to improve the living conditions of the population.

The Acting President: I give the floor to His Excellency Mr. Poul Nielson, Minister for Development Cooperation of Denmark.

Mr. Nielson (Denmark): The Cairo consensus of 1994 ranks among the best examples of the unique role of the United Nations as a forum for establishing worldwide norms for national and international action. The Cairo Programme of Action has clearly set in motion a new approach, which has resulted in widespread progress in the area of population and development. A common agenda and strong commitment from many Governments and civil society has helped create a better life for many, young as well as old.

Denmark is especially pleased to see many new initiatives geared to improve the quality of life of the individual by building on the principles of basic human rights and gender equity. This is an approach we fully believe in and fully support.

This special session of the General Assembly is a unique opportunity to strengthen and reinforce the Cairo agenda. This Assembly should give a strong impetus to renewed and joint efforts to make the Cairo Programme of Action a living and practical reality.

The Cairo Programme of Action is a very comprehensive document. I would like, therefore, to concentrate on three questions which the Danish Government believes — five years after Cairo — require urgent answers by this Assembly.

The first question is, how do we meet the growing needs of adolescents? Some argue that it is the role and responsibility of parents to ensure that adolescents receive the necessary information, counselling and health services that will enable them to make decisions regarding their sexual and reproductive health. I agree that parents have an important role to play. However, many parents are unable to fulfil this role on their own. The spread of AIDS among youth, the increasing number of young women who become pregnant while still in school and the high number of illegal and unsafe abortions is evidence of this. Parents and adolescents both need assistance from society as a whole — from teachers and health care providers, but also from the authorities, for effective protection of their rights.

In Denmark and the other Nordic countries the number of teen-age pregnancies and the number of cases of sexually transmitted disease (STD) have been reduced significantly through the extended provision of sexual education, high-quality services and the availability of a wide selection of contraceptive methods. The number of teen-age pregnancies and STD cases in the Nordic countries is now among the lowest in the world. I will not assert that the Nordic approach could be used directly in countries with different cultural and religious beliefs, but I am quite sure that some of the underlying principles — such as the respect of adolescents' own rights — could and should be applied with good results in most countries.

Knowledge is empowerment, and the best way to induce the necessary voluntary behavioural change. In many countries civil society has proved a highly effective vehicle for bringing the messages of the Cairo Programme of Action to adolescents in a way they trust and accept. We believe Governments entering into partnership with non-governmental organizations will find this very rewarding.

Denmark believes it is crucial to make young people our prime target in future. The sexual and reproductive rights of one billion adolescents neither can nor should be ignored any longer. The far too high number of teen-age pregnancies and the frightening increase in the number of

young people affected by HIV/AIDS will be reduced only if we accept adolescents' needs and respect their rights.

This leads me to the next question: how do we effectively fight the spread of AIDS? AIDS was a problem grossly underestimated in 1994. We need to strengthen our action in light of the developments since Cairo. So far the AIDS virus has infected more than 47 million people, and around 14 million have died. Worldwide, half of all new HIV infections are in young people. Every minute five young people are infected. We consider it a human right to be warned against this deadly infection.

It is high time to acknowledge that youth are sexually active and to recognize that their sexual behaviour will be decisive for future population growth, for the prevention of AIDS and for realizing the potentials of social and economic development.

For these reasons alone, Governments — with the support of the international community — must urgently redouble their efforts to combat the spread of AIDS, and Governments must give special priority to improving the sexual and reproductive health and rights of adolescents and of young women in particular. Direct and clear information campaigns are a necessary first step.

My third question is: How can we reduce the all-too-high maternal mortality rate? More than half a million women died last year from causes related to maternity and many more suffer permanent injuries after complicated pregnancies. For a number of years, we have failed to make sufficient progress in this area, although the means clearly are available. Denmark believes it is necessary to strengthen our efforts and to make use of the lessons learned.

The problem of maternal mortality is closely related to women's general living conditions. If we succeed in reducing inequalities between men and women, I feel sure that the maternal mortality rate would also decline. And if more young girls attend school and are allowed to remain in school, even if they get pregnant, I am sure that this would have a significant positive effect on maternal mortality.

Insufficient financial resources continue to be an important obstacle. To reach the goals of Cairo, donor countries and developing countries alike will need to mobilize new and substantial resources in favour of population programmes. Since population assistance is broad-based, these efforts must, however, go hand in hand with a new commitment to attaining the agreed official development assistance target of 0.7 per cent of gross domestic product. Given the fact that resources are scarce and likely to remain so, they need to be well-targeted. Donors should give priority to the poorest countries and Governments to the poor and most vulnerable people within their countries.

Since the Cairo Conference, Denmark has increased its development assistance for population activities considerably. Our assistance is primarily given through the United Nations Population Fund (UNFPA) and the other relevant United Nations agencies. Assistance is also provided to many of Denmark's closest bilateral partners among the developing countries through sector programme support in the area of health and education. We try to integrate reproductive health into all relevant sector programmes. Our experience so far has been clearly positive.

In conclusion, I wish to stress that Denmark is and will continue to be a strong advocate and supporter of the principles and goals of the Cairo Programme of Action. We remain strongly committed in our development assistance — bilateral as well as multilateral — to further making the Programme of Action of Cairo a practical reality.

The Acting President: I now give the floor to His Excellency Mr. Makhdoom Muhammad Javed Hashmi, Minister for Health and Population Welfare of Pakistan.

Mr. Hashmi (Pakistan): Five years ago, the International Conference on Population and Development (ICPD) adopted a historic Programme of Action to shift the emphasis of population programmes away from population numbers. The ICPD brought a paradigm shift in population policies and programmes in terms of their focus and scope. The Programme of Action also promoted an integrated approach in addressing the issues of population and development and the deeply interlinked issues of literacy and education, health, environment, economic growth and women's empowerment, equity and equality.

We agreed that these recommendations would be implemented by each country, consistent with its national laws and development priorities, with full respect for the various religious and ethical values and cultural backgrounds.

Pakistan, which is the seventh most populous country in the world, also embarked upon a process that sought gradually to realign its approach towards population issues. We needed this paradigm shift, as Pakistan's population programme since the mid-1960s was able to achieve only modest success.

Following the ICPD, we have launched several new initiatives for improving the availability, accessibility and quality of services. These initiatives primarily include the gradual integration of family planning with reproductive health services, a target-free and voluntary approach to family-planning services and advocacy through parliamentarians and religious scholars. We are encouraging non-governmental organizations and the private sector to play an active role in all areas of social development in Pakistan.

The role of woman in promoting population welfare cannot be overemphasized. Pakistan is therefore taking major steps for the empowerment of women. We acceded to the Convention on the Elimination of All Forms of Discrimination against Women in 1996. A National Plan of Action for Women was launched by the Prime Minister on Pakistan Day in March 1998.

We have, so far, made substantial progress in improving the reproductive health indicators. The total fertility rate has fallen and the contraceptive prevalence rate has risen, while infant and maternal mortality rates have registered an appreciable decline.

Despite the gains made through these new initiatives, Pakistan's current demographic profile, with a total population of over 134 million, poses numerous challenges to the Government as well as to civil society. Pakistan's current population growth rate is approximately 2.4 per cent per annum. The total fertility rate is about 4.8 per cent per annum. At the current growth rate, Pakistan's population would double in the next 29 years. This would be a colossal challenge to us.

Many developing countries are also confronted with similar challenges. The five-year review clearly indicates that there are serious constraints to the implementation of the Programme of Action of ICPD. While the concepts of the Programme of Action are being embraced at a reasonably fast pace, the necessary resources required to operationalize these concepts have not been made available to the developing countries. In fact, international assistance in the post-ICPD period has considerably declined.

Consequently, progress in controlling the burgeoning population has not been very satisfactory. It is estimated that the world population will total somewhere between 7 to 7.5 billion in 2015. Eighty per cent of this increase will be in developing countries. This will result in greater pressure on the environment and a further deceleration of the already slow process of development. In certain cases, it would aggravate the already deteriorating situation.

In fact, in certain areas the situation has worsened. Since 1994, the number of people living in poverty has increased. Per capita income has dropped in more than 100 countries. Nearly one third of the 4.4 billion people living in developing countries, particularly those living in the poorest countries, can expect to die by the age of 40.

The issues of population cannot be addressed in isolation. Overall development and sustained economic growth are crucial to promoting population welfare. The Cairo consensus integrated population and development in the clear understanding that the latter has a direct bearing on health, reproductive health and other social sectors. A review of the last half-decade, however, shows that our main focus remained on health and reproductive health issues only. We therefore urge that the balanced focus on population and development mapped in Cairo form an integral part of key actions for the future.

This special session has also brought to the fore the issue of the reproductive health needs of refugees all over the world. Developing countries are host to large refugee populations which have their peculiar problems. Pakistan hosts one of the largest refugee population in the world — over 1 million people. Due to declining resources, these refugees have either limited or no access to certain basic services. This Assembly has issued a call for the provision of a full range of social, reproductive health and other health services for refugees.

We fully support that call. It should, however, be recognized that for a country like Pakistan, which is unable to satisfactorily service its own population, an adequate level of services to the refugees will require massive financial and human resource investment. We remain confident that the international donor community will provide sufficient resources to carry forward the mandate entrusted to it by the General Assembly at this special session. The same will hold true for other areas of follow-up to the ICPD Programme of Action.

The ever growing population of the world in developing countries will have a global impact. It is our common future, and we should work jointly to address the threats being posed by such global problems. Developing countries cannot sustain their sincere efforts to realize the goals of the ICPD without the support of the international community. It would be unfortunate if the breakthroughs in the recent reproductive health changes are allowed to fall back mainly due to lack of resources.

In conclusion, I would like to emphasize that, at this special session, we should renew our commitment to the implementation of the recommendations of the ICPD Programme of Action by the target date of 2015. The renewal should be followed by commensurate action to provide necessary resources to realize not only the goals of the ICPD but the larger goals of economic and social development.

The Acting President: I now give the floor to Her Excellency Ms. Katrin Saks, Minister without portfolio of Ethnic Affairs of Estonia.

Ms. Saks (Estonia): At the outset, I would like to recall that Estonia aligns itself with the statement made two days ago by the representative of Germany, who spoke on behalf of the European Union and associated member States.

In my national capacity, I would like to touch upon the following issues: the well-being of families with children, the role of education and women's participation in the labour force.

People are the most important and valuable resource of any nation, especially for a nation which does not possess any remarkable natural resources and has a population of only 1.5 million. During the last 10 years, the Estonian population has diminished by 7 per cent, a trend which can be explained by a significant decrease in fertility rates, an increase in mortality, especially among men, and migration. The number of children per mother — the total fertility rate — has decreased by half, from 2.3 in 1988 to 1.2 in 1997. Population forecasts indicate that, if the present tendencies continue, in 25 years there will be 12 per cent fewer inhabitants in Estonia than there are today.

It is clear that changes in the social and economic environment have influenced the demographic processes in my country. Despite the very rapid positive developments in Estonian society during the past few years, today's conditions do not yet satisfy families enough for them to consider having more than one baby. However, despite the declining population numbers, the priority of the Estonian Government is not oriented towards raising the number of births, but rather to further developing standards of living and raising the quality of human resources.

The poverty survey conducted with the support of the United Nations Development Programme (UNDP) country office in Estonia, shows that families with children are the most vulnerable group exposed to poverty. Some 48 per cent of children under the age of 10, and 44 per cent of those between 10 and 19 years old, live in poverty. That means that the monthly income per family member is less than $67. Clearly, urgent action is needed to improve the living conditions of children and to ensure that each child will have the possibility of developing his or her full potential. It is not only a moral issue for society. The future of society itself will depend on investments in children today.

The same survey reveals that no region in the world has suffered from drastic changes in the 1990s more than the countries of the former Soviet Union and of Central and Eastern Europe. For most of these countries, transition has proved to be a traumatic process, with declining income and hyperinflation. Although Estonia's economic growth is among the highest in Europe, tough reforms have had a serious influence on social welfare and a particular impact on children and families with children.

The poverty risk of a household increases significantly as the number of children and other non-working family members increases. This also explains the low birth rate during the 1990s. For example, the birth of the first child raises the poverty risk by 10 per cent. When the mother decides to take maternity leave, the risk increases by another 25 per cent.

Estonia believes that a high quality of life should be guaranteed for all stages of a person's lifetime. The birth of a child, divorce, the loss of a husband and old age should not be endangering factors. From my comments, it should be clear that the social policy measures of the Estonian Government are focused on improving the well-being of families with children.

Recent Government decisions envisage measures to improve the child-care system and to set up an additional financial support system for motherhood. These are not

merely family policy decisions and poverty-reduction methods; they also have a positive effect on a woman's self-esteem, helping her to form a positive attitude towards life.

Each individual must have the right and the opportunity to make the most of his or her potential. The key to that is education. Surveys show that better education brings with it a more active attitude and a greater ability to cope with responsibilities. Since the children of poor families do not receive sufficient parental guidance, care and education, it is difficult for them to rise to a higher level of well-being. For that reason the second priority of the Estonian Government's family policy is education.

The level of general education among the Estonian population is very high. Every fifth woman and seventh man between the ages of 20 and 60 has a university degree. Only 15 per cent of those in this age group have studied at school less than five years. Traditionally, education and learning are highly regarded in Estonian society. Generally, the education level of women is higher than that of men.

Hunger for education among the young generation is clearly visible today. The number of students is increasing from year to year. There are 22 university students per 1,000 residents. Our goal is to preserve that level and to raise it further. All major Estonian political parties have declared quality of education to be of primary importance. I would like to underline that our Government attaches major importance precisely to the quality of education, rather than just to access to it. Basic education is compulsory and guaranteed for children up to the level of secondary school.

My last remarks touch upon the issue of women's participation in the labour force. At present, women's participation in the labour force in Estonia does not much differ from that of men. Eighty-three per cent of men and 76 per cent of women of working age are employed. The high employment rate for women is explained mainly by their high level of education. Financial considerations involved in supporting a family are of great importance as well. In our country, clearly the best strategy for families with children to cope with their daily life is for both parents to work. The State-supported day-care system is of paramount importance in supporting the employment of mothers. At present, 65 to 72 per cent of children between the ages of three and six are enrolled in day-care institutions.

Taking good care of its citizens, regardless of their age and handicaps, is the primary task of every Government. Creating good conditions for healthy family life, well-being and personal development must be the guiding light leading us into the twenty-first century.

The Acting President: I now give the floor to His Excellency Mr. Abdulla Tarmugi, Minister for Community Development of Singapore.

Mr. Tarmugi (Singapore): It gives me great pleasure to participate in this special session of the General Assembly. The Government of Singapore attaches great importance to the consensus reached in Cairo in 1994 and to the International Conference on Population and Development (ICPD) review process. The ICPD Programme of Action underscores the integral linkages between population and development. I am here today to share Singapore's development experiences and to show our support for this global enterprise.

When Singapore gained independence in 1965, our unemployment rate was about 10 per cent and our future uncertain. Singapore's per capita gross national product was low, the literacy rate was low, the infant mortality rate was high and a large proportion of the population was without proper housing. The situation was exacerbated by high population growth, which exerted tremendous pressures on the physical and social infrastructure.

The Government then decided to moderate our population growth as part of our development strategy. Appropriate population policies were launched and the Singapore Family Planning and Population Board was established in 1966 to spearhead family-planning activities. Since then, the decline in the birth rate has been rapid.

Today, our population policy is pro-family, providing strong support to working mothers. Singapore endorses the ICPD initiative encouraging States to have women-specific programmes to meet the special biological and social challenges faced by women. We recognize the difficulties working women face in balancing their multiple roles as workers, mothers and wives. To assist them, we have introduced generous tax incentives for working mothers. Employers are encouraged to grant special leave for working mothers whose children have fallen sick, and subsidized childcare is widely available. With the female labour participation rate increasing and now exceeding 51 per cent, these

Abortion continues to be one of the principal methods of birth control. Data indicate that abortions are performed here at a rate 10 to 12 times higher than in developed countries. There has been no drop in the abortion rate among adolescents and young people, but there has been an increase in the number of people affected by sexually transmitted diseases, an increase in the number of infertile marriages and an increase in the use of contraception among women of reproductive age.

As a result of the decline in the birth rate and the high death rate, the natural growth of the population has dropped, and we are already seeing a reduction in the population in certain regions of the Republic. If such trends continue, we may face a national crisis in the form of depopulation.

There has also been a decline in life expectancy. In 1998, life expectancy was 64.4 years for the population as a whole — 59 for men and 70.2 for women. Such a decline has not been seen since the end of the 1950s, and furthermore this discrepancy between men and women — 11.2 years — is evidence of the extremely high death rate among men, which is likely to become a very serious demographic problem for our Republic.

Thus, the indicator for human resource development fell. Kazakhstan now occupies the ninety-third place among 175 countries, whereas we occupied the sixty-first in 1991.

The population's age structure has also changed. Since 1991, the size of the working population and the number of children and adolescents have fallen, while the number of retirees has increased. The demographic situation is also affected by migration processes. Kazakhstan has suffered a negative migration balance. As a rule, people of active working age have been leaving, resulting in a drain of qualified workers and specialists, while the birthrate has fallen and the population is ageing at an accelerated rate. Emigration is to some extent mitigated by the repatriation of ethnic Kazakhs to their historic homeland. This is obviously insufficient, however. Over the past five years, the Republic's population has fallen by almost 1 million people.

Mrs. Ataeva (Turkmenistan), Vice-President, took the Chair.

If these problems are characteristic, as a whole, to many countries in transition, in Kazakhstan, unfortunately, there are additional problems related to prolonged ecological disaster. The demographic situation of Kazakhstan, and indeed of all Central Asia, has been most gravely affected by the environmental catastrophes in the Aral Sea, the former testing ground at Semipalatinsk and the rising Caspian Sea.

The health situation in the Semipalatinsk region, for instance, is the worst in the country. The maternal mortality rate is high, congenital defects are on the rise and the psychogenic markers of radiation have been found among the dispirited populace.

It is no accident that the negative impact of the environmental situation was accorded particular attention at the regional meeting of governmental experts of Central Asia and Azerbaijan, held in March this year in Almaty. The experts noted that, in regions of environmental disaster, 80 per cent of women of reproductive age show an elevated rate of anaemia. In such regions, internal migration for environmental reasons is characteristic.

Not only does this special session of the General Assembly offer us a new opportunity to exchange information on the demographic situation of various countries and regions of the world; it is also significant for its development of common strategies to address the existing problems. We are convinced that only through the collective efforts of the entire world community will it be possible to reverse the negative trends with which our States are unable to cope alone. We hope that the final document of the special session will reflect the current problems and provide effective measures to resolve them.

The Acting President (*spoke in Russian*): I now give the floor to His Excellency Mr. Dalit Ezhilmalai, Minister of State for Health and Family Welfare of India.

Mr. Ezhilmalai (India): India is pleased to participate in this special session of the General Assembly on the International Conference on Population and Development (ICPD). The Programme of Action of ICPD built upon agreements reached at previous summits and conferences and, in turn, had a profound influence on the deliberations at the World Summit for Social Development and the Fourth World Conference on Women. It places the individual at the centre of all development activities and women and children at the centre of population policy. It marks a major shift in our focus from family planning to reproductive health, to be addressed, of course, within the social, cultural and economic contexts of each country.

It stresses the importance of sustained economic growth in the context of sustainable development, acknowledging the responsibility of the developed countries in the international pursuit of sustainable development and continued efforts to promote sustained economic growth and to narrow imbalances in a manner that can benefit all countries, especially the developing ones. Concerted efforts are required to ensure that the international economic environment is favourable and supportive of the efforts of developing countries in this regard. Similarly, we believe that there is an urgent need for the developing countries, with the assistance of the international community, to develop and implement programmes to guarantee a minimum level of consumption for their citizens, especially the poor and the disadvantaged.

India initiated a national family-planning programme way back in 1951. Since its inception, the programme has been fully voluntary and the main efforts of the Government have been directed towards the provision of services and encouraging citizens — through information, education and communication — to avail themselves of these services. In keeping with the democratic ethos, the individual's freedom in decision-making is a hallmark of all our initiatives in this field.

We have made a sincere and significant effort to move towards the ICPD goals. Programmes have been reorganized into a comprehensive reproductive and child health package which not only emphasizes the holistic approach to reproductive health needs, but also puts quality of service and user satisfaction at the top of our agenda. Post-Cairo, India is making steady progress towards achieving reproductive health and child health goals. Based on a public health approach, the RCH programme aims at maximum coverage and promotes equity by improving accessibility and providing choices, especially for women, adolescents, socio-economically backward groups, tribals and slum-dwellers. Our reproductive and child health programme seeks to be participatory by involving all stakeholders and supporting decentralization and area-specific planning.

One of the important landmarks in the history of the family-welfare programme in India was the bold and important policy decision to withdraw the system of monitoring family-welfare programmes with a method-specific target system. This target-free approach was later replaced by a community need-based approach. This major shift in the programme has led to a focus on decentralized, need-based, participatory planning and a monitoring system with emphasis on quality of care and the delivery of essential reproductive health services.

The pattern of population growth and structure clearly outlines the need to focus on the needs of adolescents as well as of the ageing population. In order to effectively meet the changing needs of our youth, a policy that concentrates on youth empowerment and gender justice has been developed. The objectives of this policy include increased access by young people to all information and services, including — and I stress — on reproductive health and drug abuse, while at the same time promoting opportunities for continuing education, skill development and employment. We are aware of the growing menace of HIV/AIDS and we have initiated a large-scale programme of public education, counselling and preventive measures, which we trust will help us counter this serious problem.

We have been happy with the increasing involvement of the non-governmental organizations with policy formulation and the implementation and monitoring of programmes. Large parts of India are now served by a network of non-governmental organizations. The strong points of these organizations are their flexible procedures, innovative approach and rapport with the local population.

In reviewing the efforts made in the implementation of the ICPD Programme of Action, we need to ensure the maintenance of its holistic approach. While we in India have largely met our resource commitments, several countries have found it much more difficult to make such resources available. India therefore urges all partners, especially donor countries and United Nations agencies, to assist the developing countries in need with their efforts to achieve the implementation of the ICPD Programme of Action.

We are happy that the special session has resulted in the identification of ways to move forward even more meaningfully in all these areas and in an integrated and comprehensive manner.

The Acting President (*spoke in Russian*): I now give the floor to His Excellency The Honourable Isimeli Jale Cokanasiga, Minister for Health of Fiji.

Dr. Cokanasiga (Fiji): My delegation wishes to associate itself with the position of the Group of 77 and China and reaffirm our Government's commitment to addressing population policies as an integral part of

development and to working towards attaining the targets set by the Cairo Programme of Action.

The progress made towards achieving the goals of the International Conference on Population and Development (ICPD) can be gauged from two broad indicators: life expectancy and infant mortality. Our life expectancy currently stands at 69 years and is expected to reach 75 years in 2015. Our infant mortality rate presently stands at 20 per thousand live births. Improvements in life expectancy and infant mortality rates imply a greater demand on Government services for the elderly.

Another factor contributing to the achievement of ICPD goals is an improved level of education. For example, almost 100 per cent of primary-school-age children are enrolled in school, while approximately 70 per cent of the relevant age group are enrolled in secondary schools.

Our country has a well-educated workforce, and while we produce a growing number of skilled workers, we have been losing a lot of these workers as a result of outward migration and people seeking employment in developed countries such as Australia, New Zealand and, more recently, the United Kingdom and the United States.

In recognizing the important relationship between population and development, my Government has set two broad national goals in relation to population activities. The first is to ensure that population growth is compatible with sustained improvement in our standard of living. The second goal is to equip the population with a range of skills to meet the demands of an expanding economy. Towards this end, my Government, in collaboration with the International Labour Organization, finalized the Integrated Human Resource Development Programme for Employment Promotion.

While it is noteworthy that the various training programmes provide skilled personnel for the country's workforce, the constraint is the loss of trained and skilled people through emigration. Internal migration, too, has resulted in creating increased pressure on housing, public utilities and other services, as well as the illegal occupation of land in the urban areas.

For developing countries like ours, the most pressing issue is addressing the needs of people living below the poverty line, a problem that is compounded by the level of unemployment generally affecting the younger population. This unfortunate situation has implications for crime, poverty and associated social problems. My Government has initiated programmes in the informal and agricultural sectors for self-employment alternatives. This has been undertaken through the development of such schemes as microcredit financing and small businesses under the responsibility and supervision of the appropriate Government ministries and local financial institutions.

The national five-year strategic human resources plan — which has subcomponents and is targeted for completion in 1999 — will strengthen our information system. This system will enhance our capacity to collect and disseminate data and has the ability to forecast trends in the supply and demand for human resources.

In regard to gender equality, equity and the empowerment of women, my Government not only recognizes but is also sensitive to the rights of women as enshrined in our country's Constitution. We have also ratified international instruments such as the Convention on the Elimination of All Forms of Discrimination against Women and the Beijing Declaration and Platform for Action.

We support the World Health Organization's definition of reproductive health and sexual health, which refers to the rights of women and men to have access to safe, effective, affordable and acceptable methods of fertility regulation. We also endorse the words of the Cairo Programme of Action stating that the focus must be on "the right of all couples and individuals to decide freely and responsibly the number, spacing and timing of their children and to have the information ... to do so" (*A/CONF.171/13, para. 7.3*). For family planning and safe sex, contraceptives are available free of charge and distributed without coercion through government health institutions.

Increasing the choice of methods available in family planning is another activity the Government has undertaken following the ICPD. Subdermal contraceptive implants were introduced as a controlled pilot programme and became available nationwide in 1997. For the male method of contraception, vasectomy has been actively promoted in the past five years. Another milestone in this area has been the approval of a nurses and midwives board to train nurses to provide services related to intrauterine contraceptive devices.

My Government is fully aware of the need and the importance of making health-care services available to everyone. In addressing this issue, a new cadre of

workers, or volunteers, called the Community Based Distributors of family planning contraceptives was created through an inter-agency collaboration between the United Nations Population Fund, the Reproductive and Family Health Association of Fiji and the Ministry of Health.

The nutritional status of women and children in Fiji remains a concern for the Government, since it has found a high percentage of women and children to be anaemic, especially women during pregnancy. In contrast, a low percentage of males over 15 years were noted to be anaemic. Correcting this chronic anaemia problem is a goal worth achieving as part of addressing maternal morbidity as outlined in the ICPD Programme of Action.

Abortion is illegal in Fiji, but induced abortion is permissible on medical grounds only. Prevention of unwanted pregnancy is also given priority through sexual health education and expanded family-planning services. It must be noted that a large portion of our reproductive health programmes is donor-funded and dependent upon the goodwill of the international community.

Education and awareness programmes on reproductive health and contraception among adolescents are actively promoted to prevent unwanted pregnancies and sexually transmitted diseases. Our Ministry of Education has introduced family-life education in the curriculum to promote awareness among children in the upper primary and secondary schools. The objective is to sensitize children about their bodies, sexual health matters and the importance of chastity and morality in sexual behaviour in reflection of the diverse cultural values of our people.

Since Cairo, the Government has strengthened collaboration and partnership with civil societies in the area of reproductive health. It is cognizant of the fact that certain activities can be undertaken more effectively with the involvement of the non-governmental organizations, particularly in the outreach programme to eliminate sexually transmitted diseases and HIV/AIDS.

In November 1998, Ministers of Health from Pacific Island countries met in Fiji to discuss our successes and achievements and our collective response to the Cairo objectives. Fiji is grateful to the United Nations Development Programme (UNDP), UNFPA, WHO, the United Nations Educational, Scientific and Cultural Organization (UNESCO), the United Nations Children's Fund (UNICEF) and all our development partners in assisting and facilitating our efforts towards achieving our goals.

While we recommit ourselves to the Cairo Programme of Action and its review processes, my Government strongly calls for the support of the international community in realizing its goals. Achieving the multiplicity of goals set at various conferences — such as Agenda 21, the Barbados Programme of Action for Small Island Developing States and the Cairo Programme of Action — is not easy, but we can fully realize that objective if the international community, international financial institutions, the private sector, non-governmental organizations and national Governments together make a firm and collaborative commitment to such a worthy undertaking. The noble task ahead of us all is to make the world a better place for everyone to live in.

The Acting President (*spoke in Russian*): I give the floor to His Excellency The Honourable R. C. Hove, Minister, Planning Commissioner of Zimbabwe.

Mr. Hove (Zimbabwe): Zimbabwe welcomes the auspicious occasion represented by this special session of the General Assembly, as it provides us with yet another forum to review the progress made in the implementation of the Cairo Programme of Action.

Prior to the 1994 Cairo Conference, Zimbabwe, due largely to its experience with the after-effects of war — that is, combatants and refugees, which included men, women and children — had been working to provide shelter and to redress the inequities between the sexes. This made our decisions for national emancipation gender-sensitive, some of which included the promulgation of the following statutes.

The Legal Age of Majority Act of 1982 provides for the reduction of the legal age of majority from 21 to 18, which has empowered the Zimbabwean youth to determine and shape their own future.

The Matrimonial Causes Act of 1985 resulted in the further emancipation of Zimbabwean women, as inheritance provisions were revised to allow the surviving spouse a one-third entitlement to her deceased husband's estate, with the children receiving two thirds. In the past this had not been possible.

The Labour Relations Act of 1992 provided the following for women. First, women now have the right to retain their jobs after becoming pregnant. Before then, a woman who became pregnant had to resign. Secondly, they are entitled to paid maternity leave. Thirdly,

lactating mothers are given time off from their jobs to breastfeed. Fourthly, the act ensures equal pay for equal work, regardless of colour, race or sex.

In 1982, Zimbabwe conducted its first ever comprehensive national population census, which was followed by a similar one in 1992. It is expected that the next and third census will be conducted in 2002. Inter-census surveys and inter-demographic and health surveys have always been conducted between censuses. These have indicated that there are more females than males in Zimbabwe, and that 45 per cent of the country's population is made up of young people. Such information has helped Zimbabwe to plan for the emancipation of and better to provide for young people and women.

For Zimbabwe, therefore, the Cairo Conference was a landmark event in that it helped us to refocus and link population to overall socio-economic development. Subsequent to the Cairo Conference, Zimbabwe adopted a comprehensive and explicit national population policy. That policy benefited extensively from the Cairo Programme of Action in terms of its methodology and contents. Various key areas of population and development are provided for — for instance, population and the economy; population and the environment; population, health and education; and population, employment and poverty.

In the post-Cairo era Zimbabwe concluded its long-term perspective plan, Vision 2020, and elaborated on its long-term development strategies. In this regard, Zimbabwe's population is expected to stabilize and to grow at less than the rate of economic growth. This should be possible as the country implements its rolling three-year national development plans. These plans provide for family planning, including reproductive health and reproductive rights, gender equity, equality and the empowerment of women, and strategies to combat the HIV/AIDS epidemic, including the mobilization of resources for sustainable development.

Currently, my country is in the process of reviewing its Constitution, and to that end a 400-person Constitutional Review Commission has been appointed. Its task will be to collect evidence from all Zimbabweans as to the nature and character of the Constitution they want to bestow on themselves. In this context, issues relating to good governance, accountability, human rights, equality and equity and the empowerment of women, and not excluding issues related to HIV/AIDS, reproductive rights, reproductive health and poverty, among others, will no doubt come to the fore, as our people have become increasingly concerned with the deterioration in the standard of living. That, too, will further facilitate the implementation of the Cairo Programme of Action.

In the fight against the HIV/AIDS pandemic, it is evident that efforts to prevent the spread of sexually transmitted diseases, including HIV/AIDS, through behavioural change and condom distribution are becoming more effective. However, we need to take further action to ensure the continued prevention of HIV/AIDS transmission. The reproductive health programmes at the primary health-care levels now include HIV/AIDS prevention activities. Zimbabwe is also making considerable progress in addressing the HIV/AIDS pandemic through the exploration of a comprehensive adolescent sexual reproductive health programme. The programme will prepare our youth for a responsible life and reduce the number of unwanted pregnancies and sexually transmitted diseases, including HIV/AIDS.

In advancing gender equality, equity and the empowerment of women, the momentum created by the Cairo Conference has seen to the establishment of initiatives that promote the mainstreaming of gender perspectives into national policies, programmes and activities. Zimbabwe signed the Convention on the Elimination of All Forms of Discrimination against Women and is currently making steady progress in the implementation of the 1995 Beijing Platform for Action. A gender policy has now been launched and a Department for Gender Issues created. Eighty per cent of all women in Zimbabwe have varied levels of literacy. In Parliament, women's representation stands at 19 per cent of the membership. The girl child continues to be advocated for; enrolment in primary school is equally balanced between girls and boys; the balance in secondary schools is 60 per cent boys. Teacher-training colleges have a 35 to 65 per cent ratio in favour of women, while just the opposite ratio prevails in universities.

In the area of partnerships, it is extremely important for future relations between Governments and non-governmental organizations that more effective operational guidelines be concluded. This has become urgent in the face of experiences that have detracted from the original objectives to assist in the development of our people. This unfortunate tendency should be nipped in the bud.

Finally, in the area of resource mobilization, all efforts should be made to achieve the agreed targets if we are not to backslide on progress that has already been registered. We should reassess our individual performances in this regard and aim to achieve the set Cairo targets. This call is made in spite of the obvious difficulties presented by the global economic environment, which is currently beset with chronic malaise. It is our hope that the donor countries will address these issues, particularly those that have to do with the terms of trade and the national debt.

The Acting President (*spoke in Russian*): I now give the floor to His Excellency Mr. Omkar Prasad Shrestha, Minister for Industries of Nepal.

Mr. Shrestha (Nepal): I would like to take this opportunity to commend the untiring and visionary efforts of Mrs. Nafis Sadik, Executive Director of the United Nations Population Fund, who was instrumental to the success of the International Conference on Population and Development (ICPD) in Cairo five years ago and who continues to be a driving force behind this special session of the General Assembly.

The International Conference on Population and Development in Cairo was indeed a landmark event. The Conference reached a global consensus in adopting a comprehensive Programme of Action, which underscores the integral and mutually reinforcing linkages between population and development.

The Programme of Action is also trailblazing in its endorsement of a new rights-based approach to meeting the needs of individual women and men, rather than seeking merely to achieve demographic goals.

Nepal remains committed to the ICPD consensus and has taken several initiatives in the last five years towards attaining the goals of ICPD, despite all the understandable constraints of a landlocked least developed country, which I hardly need to elaborate. Let me share some of our significant initiatives with this gathering.

A National Population Committee has been established, in addition to the existing Population and Social Committee of Parliament, with a view to deepening the nation's commitment to population and development issues. The Prime Minister himself chairs this Committee, comprising, among others, all concerned Ministers. Civil society is broadly represented in the Committee.

A separate Ministry of Population and Environment has been created to advocate, facilitate, coordinate and monitor actions aimed at the integration of population concerns in the development policies and programmes of the country.

Legislative measures have been taken to further empower women and to ensure their reproductive health rights. The mainstreaming of gender issues in development policies and programmes has been adopted as our national policy. A separate Ministry of Women and Social Welfare has been established to advocate, facilitate and coordinate actions to empower women.

We have adopted a National Health Policy, formulated by the Ministry of Health, which recognizes the reproductive and sexual health rights of women, adolescents and youths. In line with this policy, a comprehensive reproductive health strategy has been developed and is being implemented.

In line with the 20/20 initiative of the Social Summit in Copenhagen, Nepal has allocated an increasing proportion of its national budget to the social sector programmes, especially such priority programmes as primary health care, basic education and rural water supply.

Policy and legislative framework are now in place to empower communities and community-based organizations to manage their natural resources and development efforts.

I am happy to note that Nepal's efforts are having encouraging results. Nepal is witnessing the onset of demographic transition. Both fertility and mortality levels have come down in recent years. Gender gaps in school enrolment have witnessed a significant reduction. Health services are now more accessible. There is greater participation of women in the political process, with a minimum of 20 per cent women's representation guaranteed in elected village and district-level bodies. The political representation of women in the national legislature is increasing. Nepal has a vibrant and active civil society which is not only on the vanguard of advocating issues, such as human rights and the empowerment of women, but is also complementing government and community efforts in the implementation of sustainable social and economic development activities.

Notwithstanding these positive trends, formidable challenges lie ahead for Nepal. The social and human

development indicators are still among the lowest in the world and the pace of improvement has been slow. Unfortunately, the post-Cairo period was marked by a rapid succession of Governments in Nepal. It is a matter of gratification that, in the third general elections after the restoration of multiparty parliamentary democracy in the country, held just a month ago, the people of Nepal decided to rectify this situation by voting into power a stable majority Government for the next five years.

The new Government has started its work in earnest and has high expectations for the review and appraisal process of ICPD initiated in The Hague last February. This special session of the General Assembly is the culmination of that review process. The measures to be adopted here for progress towards the goals of ICPD should be forward-looking and further build on the architecture we created in Cairo.

Nepal feels that the proposals for key actions for the further implementation of the Programme of Action of ICPD, prepared by the Commission on Population and Development through the dedicated and tireless efforts of its Chairman, are practical and reasonably forward-looking and, as such, deserve our endorsement.

The Acting President (*spoke in Russian*): I now give the floor to Her Excellency Mrs. Kirsti Lintonen, Under-Secretary of State of Finland.

Mrs. Lintonen (Finland): I have the honour to speak not only on behalf of Finland, but also on behalf of the European Union (EU). The Central and Eastern European countries associated with the European Union — Bulgaria, the Czech Republic, Estonia, Hungary, Latvia, Lithuania, Poland, Romania, Slovakia and Slovenia — and the associated country Cyprus align themselves with this statement.

Since the outgoing President, Germany, has already made a statement on behalf the Union, it is not our intention to repeat what has been said, but rather to take a look ahead at the future implementation of the Cairo agenda. Also, we would like to examine the links that exist between the International Conference on Population and Development (ICPD) and the wider development efforts we are engaged in as we approach the new millennium.

There is one thing that merits repeating, however, and that is our deep appreciation for the excellent work done by all of those who have been involved in the preparations for this special session. Our sincere thanks go especially to the Population Division and Mr. Chamie, to the United Nations Population Fund and Mrs. Sadik and, last but definitely not least, to Ambassador Chowdhury, whose untiring efforts in chairing our negotiations will certainly not be forgotten.

Throughout this review process, the European Union has had as its starting point and premise the concept of an integrated approach to population issues. In our view, this means both the integration of population policy in the wider context of social policy and, more specifically, the integration of reproductive and sexual health services into primary health care.

From this viewpoint, it is easy to see that, to implement the agreed goals of the ICPD Programme of Action, we need to act not only in the reproductive and sexual health sector, but in the entire social sector: in education, in issues related to gender equality and the protection of minorities, and on the whole spectrum of democracy and good governance. Only through hard work in these crucial areas can we build the enabling environment necessary for the full realization of the concept of reproductive and sexual health and reproductive rights.

It is no secret to anyone that the EU places great importance on the rights-based approach adopted at Cairo and sees reproductive and sexual rights in close connection with other universally accepted human rights. As has been stated here many times over, the EU's position is that all individuals — be they men or women, young or old — should have the right to make free and responsible decisions concerning their sexuality.

The links between demographic, social and economic development have been made clear in the context of all the global United Nations conferences of the 1990s. We cannot stress enough, however, the overwhelming weight of the evidence we have today of the profitability of investing in the social sector. Investment in health and other basic social services produces better socio-economic results than any other investment. Increased economic productivity helps to eradicate poverty and promotes social well-being, which in turn helps to achieve comprehensive human security.

The question is, of course: Who is responsible for the provision of these services and who is to pay for all this? Our common agreement continues to be that this responsibility lies with the national Governments. Even if the organization of these basic services varies from

country to country according to economic, social and other circumstances, the responsibility for guaranteeing their universal availability remains with the Governments.

Having said this, we must by no means forget the crucial role international cooperation can play in this respect. International cooperation, be it multilateral or bilateral, becomes more and more important as the world grows smaller through intensified communication and contacts between countries and people, as well as through common problems that need to be tackled together, such as global environmental issues. We must all constantly remind ourselves to keep our focus and to make sure that our efforts in all these various forums are coherent and coordinated.

Talking about resources, it is of course clear that financial resources, domestic and international, are vital for achieving the goals set in Cairo and reaffirmed here today. Even more important, however, is the political will of which today's Assembly is proof.

Also, in promoting the aims of the ICPD Programme of Action, one cannot overemphasize the vital role non-governmental organizations and the civil society as a whole can play. As we have learned, the best and most sustainable results in development are achieved when stakeholders are directly involved in the planning, implementation and evaluation of all activities.

One particularly encouraging aspect of this review process has been the active involvement of non-governmental organizations and especially youth organizations in all stages of the process. Their commitment and hard work will also be needed in the implementation of the key future actions agreed to here. It is our view that civil society is not only a great means for achieving social change, but also an end in itself, since true democracy and good governance can prosper only in an environment where citizens take active part in decision-making at all levels.

As regards programmes for adolescents — one of the first priorities for the EU during this review — it is clear that young people themselves need to be directly involved. Most promising of all of the resources required today to improve life for young people are the energy, intelligence and enthusiasm of young people themselves. The education, health and life choices offered to young people today determine the economic and social prospects of all countries in the years to come.

Experience has shown that when young people are provided with quality information, sexuality education, confidential counselling and comprehensive sexual and reproductive health services, they learn to make responsible choices. As a result, the incidence of unwanted pregnancies, abortions, HIV/AIDS and other sexually transmitted diseases decreases significantly. Also, relatively new methods, such as emergency contraception, have been proven to be safe and important additions to the range of contraceptives.

When we go home tonight, we will take with us the firm knowledge that, although the area we are dealing with is an exceptionally difficult and delicate one, it is possible and vital for all of us to work on it together. With all its ups and downs, progress and setbacks, I believe we can still agree that this process has been a success. It has been a learning experience for all involved, for us Government representatives as well as all for all the non-governmental organization and youth participants, and for those at home in all our respective countries, including parliamentarians, politicians, civil society and others — who all have their eyes and ears on us as we speak.

Still, the special session is not an isolated event. The Programme of Action rightly underlines that its implementation must be viewed as a part of an integrated follow-up effort to all major United Nations conferences and summits of the 1990s. We have all agreed to the principle of integrated conference follow-up, and it is the view of the European Union that our focus should be on the implementation of the agreed actions at the country level.

Giving people the freedom and opportunities they need to grow, to take responsibility, to make informed choices and to fulfil their potential — that is what we see as the aim of the Cairo agenda and as our common task. Not numbers, but something much more important: the rights, well-being and development of each and every individual. Only on this basis can we hope to achieve sustainable human development.

The Acting President (*spoke in Russian*): I give the floor to His Excellency Mr. Theodoros Kotsonis, Deputy Minister of Health of Greece.

Mr. Kotsonis (Greece): Greece, as a member State of the European Union (EU), fully subscribes to the EU statement delivered by the German Vice-Minister of the Federal Ministry of the Interior and looks forward to the

implementation of the Cairo agenda. We firmly believe that this special session of the General Assembly will give new impetus to the wider issues of population and development on the threshold of the twenty-first century.

My country shares the concerns of other European nations with respect to the issues of an ageing population, a low fertility rate, increased urbanization and international migration. The situation is further complicated by a recent influx of immigrants from countries at our fringe.

At a time like this, it becomes even more important to foster social cohesion and to design policies that prevent social problems such as social exclusion, poverty and all types of inequality. Of daily concern is knowing how existing policies, new programmes and any revisions thereof take into account concrete realities and alleviate problems.

The fluidity of our environment, the knowledge we thought was a given, the challenges we have yet to understand and the expectations of those around us often make us feel puzzled. That gloomy picture changes when we realize that even the hardest situations have been overcome and that societies have always survived. We can look back for lessons and for ideas to those historic times when hardship was overcome. Such lessons include seeing which institutions have endured. Family is one of them — probably the most important. In our policies we always try to see the implications for families. If we do not directly aim to strengthen them, we make sure not to weaken them.

Additionally, our policies focus on education and employment, which are the longest-enduring institutions in terms of integration and cohesion. Making sure that all children and youngsters enjoy primary education is a meaningful goal of our social policy for the younger ages. Work opportunity, which is intricately linked with education, becomes a vehicle of survival and personal dignity for all ages. We seem to agree with other countries on those two goals; in fact, we have incorporated the educational and employment dimensions in our social policies.

Regarding migration, the best way to confront its implications is through the consistent promotion of peace, stability and development in all countries concerned. In our region, which today is facing the consequences of a dire crisis, it is important to promote rapid restructuring, recovery and development in favour of the people of all the countries affected. In this context, Greece offered $7 million in humanitarian aid, in cash and in kind, a large portion of which was channelled through non-governmental organizations.

Although time is too short to describe all of the actions undertaken by the Greek Government within the population and development framework as well as all of the actions we plan to undertake, I should like to mention a few.

In the framework of national and primary health care, we have initiated more practices aimed at promoting reproductive and sexual health and rights. Highlighted priorities include family planning; maternal health; the prevention and management of sexually transmitted diseases, including HIV/AIDS; adolescent and reproductive health; and sex education and counselling.

Given the high mobility of populations in the region, we have initiated a plan of cooperation with South-Eastern European countries in order to create a shield against AIDS. We have also strengthened the planning of public welfare services and redefined their provision to four categories, including family, childhood and youth; the elderly; disabled persons; and socially vulnerable groups. We have also determined a framework for cooperation with non-governmental organizations.

With the goal of the integrated protection of the family unit, we have increased family benefits. Based on the National Action Plan for Employment, we are continuing to create new labour positions to combat unemployment. We have provided initiatives to the private sector in order to enhance economic and regional development.

We are creating the conditions necessary for the empowerment of women in the political, economic and cultural fields by redefining gender roles. We also are continuing to provide free medical, pharmaceutical and hospital care through the national health system as well as free access to the public educational system to all immigrants in need, refugees and asylum-seekers. In addition, we have established the conditions and procedures for the stay and employment of economic immigrants who reside in the country legally.

However, for us, a range of issues that address local, regional and national problems, and which in many cases have global origins, remain open for discussion. We are aware that the positive aspects of globalization could be at risk if we do not promote good regional

cooperation, concerted international action and the will to think beyond our borders.

Greece firmly believes that this international outlook is the right approach for our society to take. Our long-standing values and traditions in the area of human and social rights entitle us to do so.

We are living in a changing world, and humankind faces many challenges. It is up to us to work out problems and overcome obstacles based on lessons learned and to move towards a brave and more sensitive society.

The Acting President (*spoke in Russian*): I give the floor to His Excellency Mr. Valery Pavlov, First Deputy Minister of Labour of Belarus.

Mr. Pavlov (Belarus) (*spoke in Russian*): On behalf of the delegation of the Republic of Belarus, I wish to congratulate Mr Opertti on the occasion of his election to his high post and to express our confidence that, under his leadership, this session will fulfil all its tasks.

We would also like to express our gratitude to Ambassador Anwarul Karim Chowdhury for his tireless work as Chairman of the preparatory committee to the special session.

Since the 1994 Cairo Conference on Population and Development (ICPD), great attention has been paid at all levels of Belarus State administration to the issues of achieving sustainable development in the country and to population problems. In 1995, the National Committee on Population was established in Belarus to draft the State demographic policy and to coordinate domestic activities in the sphere of population.

The progress achieved in implementing the Cairo Programme of Action at the national level was comprehensively analysed at a conference "Belarus — Three Years After the Cairo Conference" — held in Minsk in 1997. The adoption of the Concept of the State Demographic Policy and the Principal Guidelines on its Implementation is considered to be the most important outcome of the Conference. These documents were drafted with the direct assistance of the United Nations Population Fund (UNFPA).

The transition of Belarus to the market economy has been accompanied since 1993 by a dramatic deterioration in the demographic situation. A demographic reaction to the economic crisis and the decrease in living standards began to be felt through a rising mortality rate, especially among able-bodied men; a decrease in the birth rate and average life expectancy; and significant changes in the formation and stability of the family, reproductive behaviour and migration. A natural population decrease has taken place in the Republic of Belarus. The consequences of the Chernobyl disaster, which affected most of the Republic of Belarus, must be taken into account. The trend towards an ageing population continues to accelerate. Due to its geographic situation, Belarus has also encountered the problem of illegal migration in recent years.

A census was organized in Belarus this year, according to which the population is 10.04 million. I take this opportunity, on behalf of the Government of the Republic of Belarus, to express our appreciation to the United Nations Population Fund and my own thanks to UNFPA Executive Director Mrs. Nafis Sadik for their assistance in carrying out the census to Belarus.

Currently, there are more than 10 State programmes aimed at strengthening the health-care system and the reproductive health of population; preventing the further spread of HIV/AIDS; empowering women and improving the living conditions of families, young people and the elderly; and rendering assistance to refugees have been implemented in the Republic of Belarus. Our country highly appreciates the cooperation of the United Nations and its specialized agencies. In particular, it should be noted that the United Nations Development Programme and the International Labour Organization are providing consultative and financial assistance to our country towards the realization of an international project on promoting self-employment among the unemployed. The elaboration of an international project aimed at achieving gender equality in Belarus and promoting self-employment among women is in the final stages.

Achieving the indices and fulfilling the tasks stipulated in the Programme of Action will require considerable internal and external resources, purposeful measures by national Governments and effective and transparent relations of partnership. Our country shares the concerns of many States about the decrease in resources allocated to the funds and programmes of the United Nations system. We welcome the efforts of these funds and programmes aimed at increasing the effectiveness and quality of programme activities, including those in the sphere of population and development. In such conditions, we feel that there is a need for closer cooperation among the funds and

programmes, the Bretton Woods institutions, civil society and non-governmental organizations in order to solve these financial problems and to achieve a more effective interaction within the United Nations system in the implementation of the Cairo Programme of Action.

We strongly endorse enhancing the universality of the activities of the United Nations operational funds and programmes, taking into account the needs and requirements of the countries with economies in transition in the development of these activities.

The agreed recommendations for the further implementation of the Programme of Action of the International Conference on Population and Development are to be commended. In particular, we would note the provisions aimed at strengthening efforts to protect human rights and the dignity of migrants; preventing the illegal traffic in migrants; stepping up the struggle against HIV/AIDS; maintaining reproductive health and mobilizing resources to implement the Cairo Programme of Action.

Our country has a rather constructive experience of cooperation with the United Nations programmes in the field of operational activities. We are interested in further interaction with these institutions, as well as in their assistance, which could become a significant supplement to the national efforts to fulfil the recommendations stipulated in the final document. At this stage, it is extremely important to draft and implement complex programmes to address the population problems in developing countries and countries with economies in transition by exploiting the potential of UNFPA, the United Nations Development Programme, other United Nations operational funds and programmes, and national resources and funds provided by donors.

The evolution of events throughout the world in recent months clearly demonstrated the enormous importance of the maintenance of international peace and security to the solution of population problems and the implementation of the Programme of Action of the Cairo Conference in general. The deliberate and destructive military operation in the Balkans has resulted in the emergence of several hundred thousand refugees and of niduses of certain dangerous infectious diseases. It has thrown a relatively prosperous European country decades behind in its development. From our point of view, the crisis in the Balkans should encourage the international community to seek a better understanding of the extreme importance of joint activities, within the framework of decisions taken by United Nations bodies, towards the settlement of ethnic conflicts by peaceful means in order to maintain peace, protect human rights and provide an opportunity to every person for the unhampered achievement of his or her human and spiritual potential.

In conclusion, our delegation would like to note that the Republic of Belarus intends to make further maximum efforts to fulfil the tasks and achieve the goals stipulated in the Programme of Action of the International Conference on Population and Development.

The Acting President (*spoke in Russian*): I now give the floor to His Excellency Mr. André Tsala Messi, Secretary of State for Planning and Territorial Development of Cameroon.

Mr. Messi (Cameroon) (*spoke in French*): Allow me to join those who have spoken here in sincerely congratulating you, Madam, on behalf of the delegation of Cameroon, on the way you have led the debate at the meetings of this special session.

Cameroon welcomes the United Nations decision to devote this twenty-first special session of the General Assembly — convened most opportunely on the threshold of the twenty-first century — to the overall review and appraisal of the implementation of the Programme of Action of the International Conference on Population and Development (ICPD), held in Cairo in 1994.

Five years ago, the international community met to discuss questions of population and development. Beyond the broad mobilization undertaken by the comity of nations, the philosophy that arose from those meetings was one of placing the human being at the centre of all national and international measures in the field of population and development.

Cameroon has always joined the rest of the international community in developing action plans for sustainable human development and in seeking ways and means of implementing them. Our country today reiterates its support for these plans and policies. And it is in this framework that the President of the Republic, His Excellency Mr. Paul Biya, decided to dedicate his first term of office to social justice and the fight against poverty.

In this context, a declaration laying out a strategy for the fight against poverty was adopted. The 20/20 Initiative was also adopted with a view towards allocating more resources to the social sectors.

Following the Cairo Conference many fundamental sectoral programmes and policies were adopted and implemented in our country. In the field of education and health we might mention two initiatives. One is the adoption of a framework law defining mechanisms for implementing reproductive health-care plans, including the fight against sexually transmitted diseases and, especially, AIDS. The other is the holding of a national forum on education, which led to the adoption of legislation on education guidelines. This legislation guarantees to all equal access to education without discrimination, and it provides for education about family life and for the promotion of hygiene and health in the school environment.

As regards protecting families and vulnerable social sectors, we could mention the development, now under way, of a national family code, the strengthening and continuation of a programme of education in responsible parenting and the establishment of regulatory and legislative measures to protect the elderly, the disabled, and marginal populations.

In addition, a national population policy has been developed, and steps have been taken in order to ensure the preservation of the environment.

Furthermore, the political will to achieve the advancement of women has led to the implementation of a multisectoral national plan for the integration of women in development. This plan revolves around seven priority areas: first, improvement of the living conditions of women; second, improvement of the legal status of women; third, development of female human resources in all the development sectors; fourth, access by women to effective decision-making; fifth, promotion and protection of the girl child; sixth, combatting violence against women; and seventh, improvement of the institutional framework.

This is the moment to underscore and express our gratitude for the steadily increasing support for our policies and programmes that has been provided by agencies of the United Nations system, in particular the United Nations Population Fund, the United Nations Development Programme and the United Nations Children's Fund.

The different measures we have mentioned are, as the Assembly is aware, intended to improve the living conditions and the well-being of Cameroonian populations. Unfortunately, it must be recognized that various obstacles are preventing these bold policies from yielding all of the expected results. These obstacles are: in the social sphere, religious and cultural diversity; and in the economic area, a steady decline in official development assistance, the excessive burden of foreign debt, deterioration in the terms of trade and the difficulties of gaining access to the international markets for our goods.

This shows how vital the international community's contribution remains. In this respect we are gratified by the broad consensus that has emerged during these debates on the need for the development of genuine and effective solidarity among peoples. Cameroon hopes that the commitment undertaken by countries for better results in the coming years will meet with an effective mobilization of the needed resources.

For our part, while supporting the resolutions emerging from this gathering, we remain convinced that nothing concrete and lasting can be achieved without peace. Therefore, Cameroon will continue to work actively for the advent of a prosperous society in which peace and security prevail. We invite the international community to mobilize in the search for solutions to the many conflicts that exist.

The Acting President (*spoke in Russian*): I now give the floor to Her Excellency Ms. Yolanda Rojas Urbina, Vice-Minister of the Family of Venezuela.

Ms. Rojas Urbina (Venezuela) (*spoke in Spanish*): The delegation of the Republic of Venezuela wishes to extend a warm and fraternal greeting to the peoples of the world who are gathered here to take strategic decisions in respect to population and development.

Venezuela participated in the fourth International Conference on Population and Development, held in Cairo in 1994, and it supported without reservations the new approach adopted by the international community. This approach places the rights and needs of human beings at the centre of population policies. My country reiterates its commitment to the implementation of the agreements signed in Cairo and to all the proposals that emerged as a result of the meetings of the preparatory committee for this special session. Undoubtedly they constitute a global frame of reference for the adoption of strategic measures that make it possible to speed the implementation of the Programme of Action and to ensure the attainment of the goals established for the year 2015.

The five years since 1994 have been very difficult for my country. The political system established 41 years ago collapsed in the midst of a complex economic and

social crisis. The Venezuelan economy is experiencing a sharp recession at the same time as it is facing onerous foreign-debt-servicing costs, which amount to almost 50 per cent of our annual budget and thus considerably reduce our social investments. The national reserves have been steadily declining while inflation has been rising, accentuating the inequalities.

The quality of life of the people of Venezuela has seriously deteriorated, and this has affected children, youth and women above all. We have inherited a country with an explosive social situation. Eighty-six per cent of Venezuelans live in critical poverty, and of these 46 per cent live in extreme poverty. Unemployment and underemployment have risen to alarming levels.

In the context of this difficult situation, education and health have also been harmed. Education rates have declined considerably, and this in turn has reduced the coverage and quality of health services. Levels of infant and maternal mortality have risen during this decade, placing obstacles to achieving the goals proposed at Cairo. Pregnancy among adolescents is one of the most serious problems, and it has an impact on the spread of poverty. Out of every 100 registered births, 20 involve women under the age of 19. The HIV/AIDS pandemic is steadily spreading among youth and women.

In order to turn this situation around, my Government is taking up the challenge of effecting profound structural change in order to reshape the nation and strengthen the democratic system, so that it will better serve a society whose public policies are based on justice. Accordingly, we are focusing on the strengthening of human resources with a view to contributing to sustainable development, with particular emphasis on the importance of education, respect for human rights and the well-being of all men and women in Venezuela.

The convening of a broad-based national constituent assembly will make it possible to reorient policies and restructure the administrative apparatus of the State and the judicial system. The adoption of a new Constitution will be at the centre of the actions that will allow us to achieve the much needed political, social, economic, environmental and territorial balance.

Venezuela is moving forward in the process of a peaceful and democratic revolution, building together a new plan for the country that will guarantee to all citizens the exercise of their inalienable rights.

In spite of the aforementioned complex situation, two important laws were recently passed in my country: the law on violence against women and the family, which incorporates mechanisms for the protection and defence of the rights of women in situations of domestic violence, and the law on the protection of children and adolescents, which enshrines the rights and duties of boy and girl children and adolescents from the standpoint of citizenship. That law constitutes the legal framework for the design of a national system for the comprehensive protection of girl and boy children and adolescents.

Of equal priority to us is the undertaking of actions to promote sexual and reproductive health. This will ensure that adolescents — male and female — have access to information about the prevention of early pregnancies and the early diagnosis and treatment of sexually transmitted diseases, including HIV/AIDS. Comprehensive and coordinated attention from governmental and non-governmental organizations will be reflected in a national plan for the prevention of early pregnancy as well as health care for pregnant women, screening for breast and uterine cancer and the strengthening of family-planning programmes.

In the area of education, we are committed to moving forward with the necessary reforms to ensure greater school attendance, focusing attention on preschool and technical education.

Lastly, we want to reaffirm before the Assembly our readiness and commitment to promote collectively, through the Government and through civil society — for which we need the important support of the international community — the implementation of the Programme of Action in order to achieve sustainable development in an atmosphere of respect for human rights. In this way men, women, children and the elderly can live in a country in which dignity, solidarity and social justice are an everyday fact of life.

The Acting President (*spoke in Russian*): I give the floor to Her Excellency Mrs. Claudia Fritsche, Chairman of the delegation of Liechtenstein.

Mrs. Fritsche (Liechtenstein): The Cairo Conference has resulted in significant changes in the approaches to both population and health issues by emphasizing that policies on population and reproductive health should be based on the rights of the individual. This rights-based approach is the major achievement of the Cairo Conference, and respect for the human dignity

of each individual is the legacy of that Conference for future generations.

We would like to express our gratitude to all those who have significantly contributed to preparations for this review exercise, in particular the United Nations Population Fund, under the guidance of its Executive Director, Mrs. Nafis Sadik, and Ambassador Chowdhury, who has been a very able leader throughout the lengthy and difficult negotiations on the key future actions for further implementation.

Investing in health care and education is a key element of addressing population issues — a worthy investment in the future for all of us. Education enables the individual to make informed and responsible decisions, which is a prerequisite for the implementation of the rights-based approach and leads to the expansion of people's choices, a core element of the definition of human development.

Education of girls in particular is a crucial contribution to the implementation of the contents of the Cairo Programme of Action in that it enables them to exercise better control over their lives. This is especially true in the area of sexual and reproductive health, where avoidance of unwanted pregnancies and protection against sexually transmitted diseases, in particular HIV/AIDS, remain the most formidable challenge.

Liechtenstein has been no exception to the mainstream in our region, where campaigns focused on information and sex education and targeted at preventing the further spread of the pandemic HIV/AIDS have been relatively successful. More determined and concerted global action is urgently needed, as AIDS continues to have devastating effects in many parts of the world. We have to realize, however, that, as in many other areas, not only is action by Governments required, but the role of civil society is of great importance. Many non-governmental organizations, having already made valuable contributions in the field of education and awareness-building, will continue to complement activities by Governments and international organizations. Overcoming the threat of HIV/AIDS will be possible only through a change towards responsible sexual behaviour based on respect for sexual and reproductive health.

It is clear to us that the implementation of the Cairo Programme of Action is intrinsically linked with the achievement of gender equality and the empowerment of women. The relevant parts of the key future actions before us are certainly a step in the right direction. The Fourth World Conference on Women, held in Beijing, took the outcome of the Cairo Conference as a basis for further developing women's rights. It is of crucial importance that we continue with this integrated approach in the follow-up to the major United Nations conferences.

One important point is the issue of gender-based, domestic and sexual violence, a complex, widespread and multifaceted phenomenon that continues to have detrimental effects for women worldwide. The Government of Liechtenstein has stepped up its efforts to combat this phenomenon.

The key future actions which will be adopted at the end of the special session will strengthen the political will to implement the Cairo Programme of Action as well as serve as a basis for achieving its goals and thus positively affect the quality of life of future generations.

The Acting President (*spoke in Russian*): I give the floor to His Excellency Mr. Rashid Alimov, Chairman of the delegation of Tajikistan.

Mr. Alimov (Tajikistan) (*spoke in Russian*): The twenty-first special session of the General Assembly is faced with a very important task: that of objectively and dispassionately reviewing the progress made in the five years that have elapsed since the Programme of Action of the International Conference on Population and Development was adopted in Cairo. The goal of this exercise is to chart the course for future action on the basis of lessons learned, both at the national and international levels.

Tajikistan is a firm supporter of the aims and purposes of the Programme of Action of the Cairo Conference. The Government of the Republic is making a good deal of effort to solve its population problems. We have drafted and adopted a series of standard-setting acts aimed at establishing a legal basis for action in the sphere of population. Important among these is the national programme entitled "Strategy of the Republic of Tajikistan for the Protection of the People's Health to the Year 2005", as well as a package of laws designed to improve educational conditions and the social rehabilitation of refugees and involuntary migrants.

At the same time, in implementing the Programme of Action of the Cairo Conference, my country has encountered significant difficulties arising from its many years of civil conflict, as a result of which some 60,000 people were killed or are missing and many hundreds of

thousands have found themselves in the plight of being resettled persons or refugees. My country has also encountered the problems of transition to a market economy — in particular, economic collapse and weakened social protection. At present, for every employed person there are three unemployed.

One of the most serious problems is the lack of funds for capital investment in the social sphere. In this respect, a negative role is played by, among other factors, the country's particular economic structure inherited from the former Soviet Union, which is incapable of meeting the requirements of a market economy; Tajikistan's geographic remoteness, which has a significant detrimental effect on external economic activity; and mountainous terrain that makes a mere 7 per cent of our country suitable for human settlement. All this makes external support crucial to our country. We are grateful to the World Bank and the International Monetary Fund for their support of our Government's efforts to overcome these difficulties.

My country has a deep understanding of the need to do everything possible to fulfil the aims of the Programme of Action of the Cairo Conference. In this connection, my Government has established several priority lines of action.

The civil conflict in Tajikistan led to several waves of resettlement, both within the Republic's borders and beyond. The number of those compelled to resettle almost reached 700,000. The unprecedented scale of migration has led to a significant outflow of qualified workers. The national composition of the country has changed. That is why the issue of migration — which, through the civil conflict, has become an important demographic factor — is of very special significance to us. In this context, we attach great importance to the implementation of the decisions of the 1996 Geneva Regional Conference to Address the Problems of Refugees, Displaced Persons, Other Forms of Involuntary Displacement and Returnees in the Countries of the Commonwealth of Independent States and Relevant Neighbouring States.

A very important element here, a key condition for sustainable development, is education. Despite the facts that educational institutions are accessible in terms of location and numbers and that the level of literacy among the Tajik population remains quite high, in the years since independence we have seen an alarming drop in school attendance, an increase in the number of drop-outs and a lack of qualified staff. Because of the lack of funds, the State cannot provide a sufficient supply of school textbooks and school buildings cannot be built fast enough, especially in places that were touched by the civil conflict. Difficulties in the educational system also call for urgent measures, first, to find new sources of funding, including, of course, international assistance and private funds from the newly independent countries.

Of course, ultimately, sustainable development depends in any country on the adequate health care. Recognizing this, the Government of Tajikistan is pursuing its target-oriented work to improve the health-care system, focusing on lowering infant and maternal mortality rates and extending life expectancy.

Eliminating gender inequality in access to social care, employment and education; improving the status of women; protecting the family; maternity and childhood are problems that remain priorities for us. Despite the difficulties caused by the civil conflict and the transition to a market economy, we have a national mechanism in Tajikistan for guaranteeing equal rights and opportunities, particularly in education and family planning. The Government has undertaken substantial measures to improve women's health and to reduce maternal mortality. Since 1995, we have enjoyed cooperation with the United Nations Population Fund, thanks to which we have established independent centres and offices for reproductive health in women's advisory bureaux at the national, regional and urban levels. Measures are also being carried out to prevent the use of abortion as a means of family planning.

These tasks are being undertaken in the most complicated post-conflict conditions. There has been a sharp deterioration of socio-economic conditions throughout the country, leading to more frequent outbreaks of epidemics, especially of water-borne diseases. We have also seen an increase in sexually transmitted diseases and HIV/AIDS. Despite the fact that we have established fruitful cooperation with the United Nations Development Programme, in the context of which we have, since 1996, implemented a programme of prophylaxis against and prevention of HIV/AIDS, the spread of this twentieth century plague is a source of great alarm. This is all occurring in a country where financing for health care is inadequate and qualified medical staff are lacking.

The Government is also focusing on developing and perfecting a system for the collection and analysis of demographic data, an essential factor of any scientifically based and effective population policy. Among the measures to be taken in this field, we are looking

forward to the forthcoming census in Tajikistan, the first since independence.

There are many difficulties that remain to be overcome in achieving the noble aims of Cairo. We are convinced, however, that, in combining the well-conceived and justified policies of national Governments with the solid support of the international community, we shall effectively achieve those tasks. Tajikistan stands ready to make its own contribution to this important task.

The Acting President (*spoke in Russian*): We have heard the last speaker in the debate for this meeting.

I shall now call on those representatives who wish to speak in exercise of their right of reply. I remind members that, in accordance with General Assembly decision 34/401, statements in exercise of the right of reply are limited to 10 minutes for the first intervention and to five minutes for the second intervention and should be made by delegations from their seats.

Mr. Adam (Israel): My delegation wishes to apologize for taking the floor again at this stage in a session meant to focus on important issues affecting health and the social situation around the globe.

It is regrettable that the head of the Palestinian observer delegation, in his remarks towards the end of this morning's meeting, chose instead to raise again political issues that have no place in such a forum.

I do not wish to engage in polemical debate with the Palestinian delegate here. I would like, however, to remind the Assembly that 97 per cent of the Palestinian population in the West Bank and Gaza, whose conditions were mentioned by the Palestinian delegate, now live under the jurisdiction of the Palestinian Authority as a result of agreements between Israel and the Palestinians. Moreover, it is the peace process and not forums such as this one that provide the appropriate frameworks for resolving all outstanding issues between the parties concerned, including the issue of the Palestinian refugees.

Thanks to the recent democratic election process in Israel, a new Government is now ready to take office with the aim of further advancing the peace process. We look forward to achieving progress on all tracks of the negotiations in order to resolve all outstanding issues and achieve a lasting peace in our region.

Mrs. Barghouti (Palestine) (*spoke in Arabic*): My delegation finds it strange for the delegate of Israel to take the floor to reply at this point before our meeting ends. My delegation has requested the floor in turn to exercise its right of reply.

The statement by the Palestinian delegation was fully in line with the concerns and preoccupations of an entire people in the field of population and development. The reply by the Israeli delegation is merely a trivial attempt to intrude other issues into the subject. However, the information he has given is false. Let me just note that 200,000 Palestinians live under direct Israeli occupation, and all Palestinians throughout Palestine are, in fact, under direct Israeli occupation, be the Israeli tanks inside or around our towns. Therefore, the reality of this abhorrent occupation cannot be set aside.

Furthermore, the Israeli claims just set forth really show a rather racist Israeli understanding of the creation of Palestinian bantustans, similar to those created under apartheid, to deal with the Palestinian problem. As for the new Israeli Government, we really do hope that it will undertake different policies from those of previous Israeli Governments, and we hope that this will lead Israeli representatives here to also express different positions from those we heard today.

At any rate, the yardstick for the new Government — or for any other Government — remains the implementation of agreements, an end to colonial settlements in Palestinian land and respect for the norms of international law and international humanitarian law, along with relevant United Nations resolutions.

The meeting rose at 6.25 p.m.